

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 02, 2005 8:00 am
Secretary of State

05-02-2005 90452 008 ***150.00

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|--|--|---|--|--|---|
| DOCUMENT # P03000079747 | | | | | |
| 1. Entity Name 250 PARK AVENUE TRUSTEE, INC. | | | | | |
| Principal Place of Business 300 SOUTH ORANGE AVE., STE. 975 ORLANDO, FL 32801 | | | Mailing Address 300 SOUTH ORANGE AVE., STE. 975 ORLANDO, FL 32801 | | |
| 2. Principal Place of Business 250 S. Park Ave. | | | 3. Mailing Address 250 S. Park Ave. | | |
| Suite, Apt. #, etc. Suite 630 | | | Suite, Apt. #, etc. Suite 630 | | |
| City & State Winter Park, FL | | | City & State Winter Park, FL | | |
| Zip 32789 | | Country USA | | Zip 32789 | |
| Country USA | | 4. FEI Number NOT APPLICABLE | | | |
| 5. Certificate of Status Desired <input type="checkbox"/> | | | | \$8.75 Additional Fee Required | |
| 6. Name and Address of Current Registered Agent CORPORATION COMPANY OF ORLANDO 300 SOUTH ORANGE AVE STE 1000 (J3S) ORLANDO, FL 32801 | | | 7. Name and Address of New Registered Agent Name: Battaglia, W.P. Street Address (P.O. Box Number is Not Acceptable) 250 South Park Ave., Suite 630 City: Winter Park FL Zip Code 32789 | | |
| 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE: <u>W.P. Battaglia</u> DATE: <u>04/27/05</u> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small> | | | | | |
| FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 | | 9. Election Campaign Financing <input type="checkbox"/> \$5.00 May Be Added to Fees | | | |
| 10. OFFICERS AND DIRECTORS | | | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | DP STAHLEY, SCOTT R 300 SOUTH ORANGE AVE., STE. 975 ORLANDO, FL 32801 | <input checked="" type="checkbox"/> Delete | | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | AS SLONE, JENNIFER L 300 S ORNAGE AVE # 1000 ORLANDO, FL 32801 | <input checked="" type="checkbox"/> Delete | | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Delete | <input type="checkbox"/> Delete | | TITLE NAME STREET ADDRESS CITY-ST-ZIP | DP Battaglia, W.P. P.O. Box 3010 Winter Park, FL 32790 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Delete | <input type="checkbox"/> Delete | | TITLE NAME STREET ADDRESS CITY-ST-ZIP | SID Battaglia, R.E. P.O. Box 3010 Winter Park, FL 32790 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Delete | <input type="checkbox"/> Delete | | TITLE NAME STREET ADDRESS CITY-ST-ZIP | ASD Butts, Ansley B P.O. Box 3010 Winter Park, FL 32790 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Delete | <input type="checkbox"/> Delete | | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered. | | | | | |
| SIGNATURE: <u>W.P. Battaglia</u> | | W.P. Battaglia, President 4/27/05 407-622-1700 | | | |
| <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small> | | <small>Date Daytime Phone #</small> | | | |